

CONSTITUENT TOUR REQUEST FORM

Name: _____ Date: _____

Organization (if any): _____

Address: _____

Phone: (h) _____ (w) _____

E-mail Address: _____

Washington, D.C. Contact Information: _____

Time/Date of Arrival in D.C.: _____

Time/Date of Departure: _____

Number in Party: _____ Under age 8: _____

Special Needs/Instructions: _____

SITES OF INTEREST:

(___) White House*: _____
(Tuesday-Saturday, 8 a.m.- 9:45 a.m.)

(___) Library of Congress: _____
(Monday-Friday, 8:30 a.m.- 2:00 p.m.)

(___) National Archives: _____
(Monday-Friday, 10:15 a.m. and 1:15 p.m.)

(___) Supreme Court: _____
(Monday-Friday, 3 p.m. - 5 p.m.)

(___) U.S. Capitol: _____
(Monday-Saturday, 9 a.m. - 4:30 p.m.)

(___) Engraving and Printing: _____
(Monday-Friday, 8:15 and 8:45 a.m.)

(___) Holocaust Memorial Museum: _____
(10 a.m. - 5:30 p.m.)

(___) Kennedy Center: _____
(Monday-Friday, 10 a.m. - 5 p.m.)

* School groups only